

Fill	in this information t	o identify your c	ase:								
De	btor 1	john wikiera	ı, JR								
Debtor 2 dawn wikiera (Spouse, if filing)											
Un	ited States Bankrup	tcy Court for the	: EASTERN DISTRICT	OF PEI	NNSYLVANIA						
Case number 16-17018							Check if this is:				
(If known)						☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:					
0	fficial Form	106I				Ī	1M / DD/ Y	YYY			
S	chedule I: `	Your Inc	ome					12/1			
Pa 1.	Tt 1: Describe Employment Fill in your employment information			Debte	or 1	Debtor 2 or non-filing spouse					
١.	information.	oyment	Debtor 1			Debtor 2 or non-filing spouse					
	If you have more attach a separate		Employment status	■ Employed			■ Emple				
information about employers.		additional			ot employed	☐ Not employed					
	Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.		Occupation	warehousemen warehousemen			Recept	ionist			
			Employer's name	mck	esson		The Fo	ot and Ankle Group, PC			
			Employer's address		n henry dr insville, NJ 08691			8001 Roosevelt Blvd., Suite 203 Philadelphia, PA 19152			
		How long employed the	w long employed there? 29 Years, 10 Mont		hs	_9	Years, 11 Months				
Pa	rt 2: Give De	tails About Mor	nthly Income								
	imate monthly incouse unless you are		ate you file this form. If	you hav	e nothing to report for any	line, write	e \$0 in the	space. Include your non-filing			
	ou or your non-filing e space, attach a se			ombine t	he information for all empl	oyers for	that perso	on on the lines below. If you need			
						For Del	btor 1	For Debtor 2 or non-filing spouse			
	List monthly aro	ss wages, sala	ry, and commissions (be	efore all	pavroll						

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

filing spouse	non-f			
1,526.50	\$	773.00	\$_	2.
0.00	+\$_	163.79	+\$_	3.
1,526.50	\$_	936.79	\$_	4.

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Debtor 1 Debtor 2		john wikiera, JR dawn wikiera		Case	number (if known)	16-17018				
	Con	y line 4 here	4.		For \$	Debtor 1 936.79		Debtor 2 or filing spouse 1,526.5		
	-	*			-		·	.,02010		
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58		\$_	222.66	\$	347.0		
	5b.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5k		\$ \$	0.00	\$	0.0		
	5c. 5d.	Required repayments of retirement fund loans	50 50		\$ _	0.00	\$ 	0.0		
	5e.	Insurance	5e		\$ -	14.00	\$	0.0		
	5f.	Domestic support obligations	5f		\$ -	0.00	\$	0.0		
	5g.	Union dues	50	g.	\$	14.75	\$	0.0		
	5h.	Other deductions. Specify:	5h	า.+	\$_	0.00	+ \$	0.0	00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	251.41	\$	347.0	00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	685.38	\$	1,179.5	50	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$	0.00	\$	0.0	00	
	8b.	Interest and dividends	8b	ο.	\$	0.00	\$	0.0	00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c .	\$	0.00	\$	0.0	00	
	8d.	Unemployment compensation	80	d.	\$_	0.00	\$	0.0	00	
	8e.	Social Security	86	€.	\$_	0.00	\$	0.0	00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8f 8g	g.	\$_ \$_ \$_	0.00	\$ \$ + \$	0.0	00	
	8h.	Other monthly income. Specify:	_ 01	า.+ 	Φ_	0.00	+ \$	0.0		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	0.00	\$	0	.00	
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		685.38 + \$	1 17	79.50 = \$	1	,864.88
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		- 003.30 + ψ_	1,17	σ.50 – Ψ	- '	,004.00
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00									0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12. \$	1	,864.88
									bined thly in	d ncome
13.	Doy ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?							

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